

## Training Evaluation Survey

*Please provide us feedback on the training in which you have participated. Your feedback will be most useful in helping us develop or refine future training for school- and district-based personnel.*

**Your Job Title:**

☐ Teacher-General Education

☐ School Administrator/Staff \_\_\_\_\_

☐ Teacher-Special Education

☐ School Support Personnel

☐ District Administrator/Staff \_\_\_\_\_

☐ Discretionary Project Personnel

**Directions:** Based on your experience as a participant in this training, please indicate your level of agreement or disagreement with each of the statements below using the response scale given. Please shade in the option that best represents your response.

1 = Strongly Disagree (SD)

2 = Disagree (D)

3 = Neutral (N)

4 = Agree (A)

5 = Strongly Agree (SA)

	SD	D	N	A	SA
1. The content presented in the training session addressed the needs of my school/district.	1	2	3	4	5
2. The content presented was appropriate given my knowledge and skill level.	1	2	3	4	5
3. The amount of content covered was appropriate given the time allotted for the training.	1	2	3	4	5
4. The presenter(s) clearly articulated the major concepts and ideas that were the focus of the training.	1	2	3	4	5
5. The presenter(s) adequately demonstrated how to use strategies that were the focus of the training.	1	2	3	4	5
6. The materials (handouts) provided facilitated my understanding of the content presented.	1	2	3	4	5
7. The materials (handouts) provided were useful for the content presented.	1	2	3	4	5
8. The training facility provided an environment conducive to learning.	1	2	3	4	5
9. The training facility was appropriate given the activities involved.	1	2	3	4	5

**Directions:** Using the rating scale below, please shade in the option that best represents your response.

1 = Not at all  $\longleftrightarrow$  6 = Greatly

	Not at all					Greatly
10. To what extent did the training session:						
a. increase your knowledge?	1	2	3	4	5	6
b. meet its intended objectives?	1	2	3	4	5	6

	Never					Always
11. To what extent will you:						
a. use what you learned from the training session?	1	2	3	4	5	6
b. recommend the training session to others?	1	2	3	4	5	6

12. Overall, how satisfied were you with the quality of the training received in this workshop?

1 Very Dissatisfied    2 Dissatisfied    3 Somewhat Satisfied    4 Satisfied    5 Very Satisfied

13. Please describe how will you use the ideas and skills learned today to improve student outcomes.

---



---



---

14. Please identify potential training topics that would be most helpful for your job.

---



---



---

15. What additional comments or suggestions do you have for the presenter(s)?

---



---

**THANK YOU FOR YOUR FEEDBACK!**